



4-16-04

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Express Mail Label No. EU404285397US

Appl. No.: 10/611,440
Applicant: Neil Berinstein et al.
Filed: July 1, 2003
Title: Tumor Antigens BFA4 and BCY1 for Prevention and/or Treatment of Cancer
TC/A.U.: Not known
Examiner: Not known
Confirmation No.: 1959
Docket No.: API-02-11-US

Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO NOTICE TO FILE MISSING PARTS
OF NONPROVISIONAL APPLICATION

Sir:

Attached herewith are: 1) one Transmittal Form, 2) one Fee Transmittal Form, 3) one Credit Card Payment form, 4) one Petition for Extension of Time under 37 CFR 1.136(a), 5) nine declarations of the inventors, 6) one paper copy of the Sequence Listing, 7) one computer readable form copy of the Sequence Listing, and 8) one return receipt postcard.

REMARKS

In response to the Notice to File Missing Parts of Nonprovisional Application of November 6, 2003 ("NOTICE"), the Applicants respond as follows:

1. Oath or Declaration.

The NOTICE stated that the oath or declaration for the above-identified application is missing. Applicants attach hereto the declarations of the inventors.

2. Late Oath or Declaration Surcharge/Additional Claim Fees.

04/20/2004 SDIRETA1 00000076 10611440

01 FC:1051	130.00 OP
02 FC:1201	86.00 OP
03 FC:1203	250.00 OP

The NOTICE stated that a late oath or declaration surcharge of \$130 for a non-small entity must be submitted. The NOTICE also stated that additional claims fees of \$452 for a Large Entity are required. This fee is a combination of fees for "total claims over 20" (\$162) and "multiply dependent claim surcharge" (\$290).

With respect to the claim fees for "total claims over 20", Applicants respectfully disagree with the calculated "total number of claims over 20" and hence the additional claim fee owed. The total number of claims of the above-identified application is 39, which gives 19 claims over 20. Applicants paid the fee for 19 claims over 20 (\$342) with the filing of the above-identified application pursuant to the Fee Transmittal of July 1, 2003. Thus, the no fee is owed for the "total number of claims over 20".

Applicants discovered that the extra claim fee for "independent claims over 3" paid pursuant to the Fee Transmittal of July 1, 2003 was in error in that the total number of independent claims stated thereon was in error. The total number of independent claims is 7, rather than 6 as stated in the Fee Transmittal of July 1, 2003. Thus, Applicant would owe \$86 for an additional "independent claim over 3".

In sum, we believe the total of the additional fees owed is:

\$130	for Late oath or declaration Surcharge
\$ 0	for no additional "claims over 20"
\$ 86	for one additional "independent claim over 3"
<u>\$290</u>	for "multiple dependent claim surcharge"
\$506	

In view of the above, Applicants attach hereto a completed and signed Credit Card Payment form to cover the fees Applicants believes they owe. The total amount owed for the the Late oath or declaration Surcharge and additional claim fees is \$506. Please note that the Credit Card Form also includes payment for an Extension for four months (\$1480). If necessary, please charge any additional fees required or credit any fees overpaid to Deposit Account No. 50-0244.

3. Sequence Listing.

The NOTICE stated that Applicant must provide an initial computer readable form copy of the "Sequence Listing", an initial paper or compact disc copy of the "Sequence Listing", as well as an amendment directing its entry into the application. Also, the NOTICE stated that Applicant must provide a statement that the content of the sequence listing information recorded

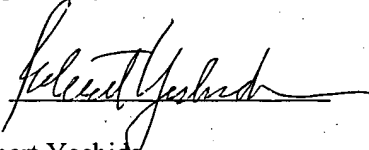
on the computer readable form is identical to the written sequence listing and, where applicable, includes no new matter.

Applicant respectfully requests that pages 49 and 50 of the above-identified application be deleted and replaced with the attached pages 1 through 64 of the paper copy of the Sequence Listing. Applicants also attach a computer readable form copy of the Sequence Listing for entry. Applicants hereby state that the content of the sequence listing information recorded on the computer readable form is identical to the paper copy of the sequence listing and includes no new matter.

Applicant respectfully requests consideration and entry of this paper. Should the Examiner have any questions concerning this application, he is invited to contact the undersigned at (570) 839-5537.

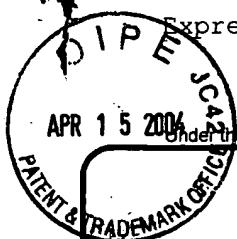
Date: April 15, 2004

Respectfully submitted,

By: 

Robert Yoshida
Reg. No 54,941

Aventis Pasteur, Inc.
Intellectual Property - Knerr Building
One Discovery Drive
Swiftwater, PA 18370
Telephone: (570) 839-5537
Facsimile: (570) 895-2702

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/611,440	
	Filing Date	July 1, 2003
	First Named Inventor	Neil Berinstein
	Art Unit	Not known
	Examiner Name	Not known
Attorney Docket Number	API-02-11-US	
Total Number of Pages in This Submission	110	

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	See 1 in Addendum
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application	The total number of pages for this submission includes this Transmittal form.	
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Robert Yoshida; Aventis Pasteur Inc.
Signature	<i>Robert Yoshida</i>
Date	April 15, 2004

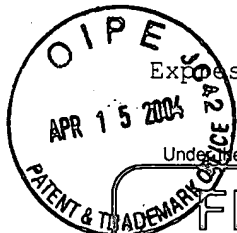
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Washington, DC 20231 on this date:

Typed or printed name			
Signature		Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1986.00)

Complete if Known

Application Number 10/611,440
Filing Date July 1, 2003
First Named Inventor Neil Berinstein
Examiner Name Not known
Art Unit
Attorney Docket No. API-02-11-US

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number
Deposit Account Name

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☐ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	X	
Independent Claims	-3** =	X	
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	130.00
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	1,480.00
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify) Additional claim fees			376.00

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$1986.00)

SUBMITTED BY

Name (Print/Type)	Robert Yoshida	Registration No. (Attorney/Agent)	54,941	Telephone	570-839-5537
Signature		Date	April 15, 2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attachment to (PTO/SB/21) Transmittal Form (continued)

1. one Credit Card Payment Form (PTO-2038) (1 page); nine Declaration of Inventors (37 pages); one paper copy of Sequence Listing (64 pages); and one disc containing computer readable form copy of Sequence Listing.